

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	A. BOONE		07-27-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TL	OR	08/13/07
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	12-9-01
2	✓	✓	12-23-03
3	✓	✓	1-12-04
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
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41	✓	✓	
42	✓	✓	
43	✓	✓	
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45	✓	✓	
46	✓	✓	
47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	06-27-03
52	✓	✓	06-27-03
53	✓	✓	06-27-03
54	✓	✓	06-27-03
55	✓	✓	06-27-03
56	✓	✓	06-27-03
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64	✓	✓	06-27-03
65	✓	✓	06-27-03
66	✓	✓	06-27-03
67	✓	✓	06-27-03
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73	✓	✓	06-27-03
74	✓	✓	06-27-03
75	✓	✓	06-27-03
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77	✓	✓	06-27-03
78	✓	✓	06-27-03
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80	✓	✓	06-27-03
81	✓	✓	06-27-03
82	✓	✓	06-27-03
83	✓	✓	06-27-03
84	✓	✓	06-27-03
85	✓	✓	06-27-03
86	✓	✓	06-27-03
87	✓	✓	06-27-03
88	✓	✓	06-27-03
89	✓	✓	06-27-03
90	✓	✓	06-27-03
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97	✓	✓	06-27-03
98	✓	✓	06-27-03
99	✓	✓	06-27-03
100	✓	✓	06-27-03

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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